

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 · March 1 · Filing Fee: \$50.00\* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK \* In accordance with R.I.G.L. 7-1.2-1501(c), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(cod)) is subject to a penalty fee of \$25.00.

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1. Corporale ID No. <b>20981</b>		2. Name of Corporation Rite Properties, Inc.				
3. Street Address Principal Business Office 400 Riverview Drive			City Tiverton	State RI	7.tp 02878	
4. Business Phone No. 5. State of Incorporat 4016249455 RI			ion			
6. Brief Description of the C retail fuel oil dealer	baracter of Business Conduct	ed in Rhode Island		7.11000-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
7. NAMES AND ADD	RESSES OF THE OFFIC	CERS: ("X" BOX FOR A	TTACHMENT) 🔲 FILL IN	SPACES BEFORE USING	ATTACHMENTS	
President Name			Vice President Name			
Ernest E. Silvia			Todd Silvia			
Street Address 400 Riverview Drive			Street Address 400 Riverview Drive			
City	State	Zip	СИУ	State	Zip	
Tiverton	RI	02878	: Tiverton	RI	02878	
Secretary Name Gregg Silvia			Treasurer Name Jacqueline M. Silvia			
Street Address 400 Riverview Drive			Street Address 400 Riverview Drive			
City Tiverton	State RI	<sup>Zip</sup> 02878	City Tiverton	State RI	Ζip 02878	
8. NAMES AND ADDI	RESSES OF THE DIREC	CTORS: ("X" BOX FOR	ATTACHMENT) 🔲 FILL	IN SPACES BEFORE USIN	G ATTACHMENTS	
Director Name			Director Name			
Ernest E. Silvia			Todd Silvia			
Street Address			Street Address			
400 Riverview Driv			400 Riverview Driv	/e		
City	State	Zip	City	Stale	Zip	
Tiverton	jRI	J02878	Tiverton	RI	02878	
Director Name Gregg Silvia			Director Name			
Sireet Address			Jacqueline M. Silvia			
400 Riverview Drive			Street Address 400 Riverview Drive			
City Tiverton	State RI	<i>ир</i> 02878	City Tiverton	State RI	2ip 02878	
9. SHARES AUTHORI	ZED ("X" BOX FOR A	TTACHMENT)	: 10. SHARES ISSUEI	I O ("X" BOX FOR ATTACA	1	
AUTHORIZED SHARES				ECTION MUST BE COMPLETED	_	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
5000 common no par value			220	common	no par value	
		corporation by an authorogen	orized representative. If the	corporation is in the hand	s of a receiver or trustee,	

be executed on behalf of the corporation by the receiver or trustee

	under penalty of perjuty, I declare and afterm the including any accompanying schedules and state		
	contained herein are true and correct.		
File Date	Einest E. Silvia  Ernest E. Silvia  Print or Type Name		
Check No. FEB 0 8 2008			
By:			
FOR SECRETARY OF STATE LISE ONLY	President		
TOTAL DESIGNATION OF GRANDED ON E.	Title		

at I have examined this report, ements, and that all statements

Date

Form 630 Rev. 12/06